

Fill in this information to identify your case:

Debtor 1	Catherine Renee Reid		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF PENNSYLVANIA		
Case number (if known)	16-12776		

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion if any
\$15,446.63	\$10,896.00	\$4,550.63

2.1 Ally Financial

Creditor's Name

P.O. Box 380902
Bloomington, MN
55438-0902

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

2012 Dodge Avenger 22000 miles
Debtor's Possession. Estimated
valued based on Kelley Blue Book.

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset) **Car Loan**

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred **03/28/2012**Last 4 digits of account number **3480****2.2 American Income Life Insurance Comapny**

Creditor's Name

PO Box 2608
Waco, TX 76797

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

American Income Life Insurance
Company
Beneficiary: Cassandra B. Ewell

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

\$2,120.68

\$11,274.00

\$0.00

Debtor 1 **Catherine Renee Reid** Case number (if know) **16-12776**
 First Name Middle Name Last Name

Date debt was incurred _____ Last 4 digits of account number **8919**

2.3 Centers for Medicare & Medicaid Services <small>Creditor's Name</small> PO Box 138832 Oklahoma City, OK 73113 <small>Number, Street, City, State & Zip Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"> Auto Accident Lawsuit: Reid vs Miller Phila Ct. Common Pleas Case ID: 160401024 </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) indemnification	\$12,056.09 \$22,056.09 \$0.00	
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Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred **7/28/2014** Last 4 digits of account number **605A**

2.4 Colonial Savings F.A. <small>Creditor's Name</small> 2626 West Freeway Fort Worth, TX 76102 <small>Number, Street, City, State & Zip Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"> 5732 N. Fairhill Street Philadelphia, PA 19120 Philadelphia County </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage Loan	\$92,244.35 \$100,300.00 \$0.00	
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Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred **05/15/2009** Last 4 digits of account number **3500**

2.5 NOVAD Management Consulting LLC <small>Creditor's Name</small> Attn: HUD EHLP Department 2401 NW 23rd Street Oklahoma City, OK 73107 <small>Number, Street, City, State & Zip Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;"> 5732 N. Fairhill Street Philadelphia, PA 19120 Philadelphia County </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Second Mortgage	\$50,000.00 \$100,300.00 \$41,944.35	
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Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Debtor 1 **Catherine Renee Reid** Case number (if know) **16-12776**
First Name Middle Name Last Name

Date debt was incurred _____ Last 4 digits of account number **6462**

2.6	Secretary of Housing and Urban Developme	Describe the property that secures the claim:	\$20,000.00	\$100,300.00	\$20,000.00
Creditor's Name	5732 N. Fairhill Street Philadelphia, PA 19120 Philadelphia County				
451 Seventh Street SW Washington, DC 20410 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Partial Claim Mortgage				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt					

Date debt was incurred **01/13/2016** Last 4 digits of account number **3500**

Add the dollar value of your entries in Column A on this page. Write that number here:
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here:

\$191,867.75
\$191,867.75

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Secretary of Housing & Urban Development Wanamaker Building 100 Penn Square East Philadelphia, PA 19107-3380	On which line in Part 1 did you enter the creditor? 2.6 Last 4 digits of account number 3500
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